



## Baishideng Publishing Group Co., Limited

Flat C, 23/F., Lucky Plaza,  
315-321 Lockhart Road,  
Wan Chai, Hong Kong, China

### ESPS Peer-review Report

**Name of Journal:** World Journal of Gastroenterology

**ESPS Manuscript NO:** 4796

**Title:** Implementation of salvage irrigation-suction following gracilis muscle transposition in cases of complex rectovaginal and rectourethral fistulas

**Reviewer code:** 00043262

**Science editor:** Song, Xiu-Xia

**Date sent for review:** 2013-07-24 15:53

**Date reviewed:** 2013-08-02 11:30

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

### COMMENTS TO AUTHORS

the authors submit a small prospective series of gracilis interposition for complex RV and RU fistulas. Though this is a small series it does provide useful information to the readers. I do have a few questions however. 1. Was fecal diversion used prior to gracilis interposition in any of the cases? 2. was a urinary catheter left in place for any length of time after the RU procedures? 3. In one of the cases drainage was noted after one day, was this too soon to consider a failure and begin irrigation? 4. Why were only RV fistulas of the upper third of the RV septum included and not lower fistulas? 5. Only 5 pts underwent irrigation, this seems too few to provide meaningful comparison to the remaining group. This could use further discussion in the discussion section. 6. The authors could also better discuss the ideal indications for this procedure and when it should be considered.



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**ESPS Manuscript NO:** 4796

**Title:** Implementation of salvage irrigation-suction following gracilis muscle transposition in cases of complex rectovaginal and rectourethral fistulas

**Reviewer code:** 00001787

**Science editor:** Song, Xiu-Xia

**Date sent for review:** 2013-07-24 15:53

**Date reviewed:** 2013-08-07 23:01

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
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### COMMENTS TO AUTHORS

I read with interest the manuscript "Implementation of salvage irrigation-suction following gracilis muscle transposition in cases of complex rectovaginal and rectourethral fistulas" by Xiao-Bing Chen and coworkers. It is an innovative paper dealing with a relevant surgical intervention in fecal incontinence. No major points from this side. However, The Authors should quote the Literature about the commonly reported improvement in QOL scores in fecally incontinence irrespective of treatment outcome. In this disease intervening "per se" seems to help psychologically the patient. Therefore, I would reinforce in the discussion that the improvement in both Wexner score and QOL score is the strength of the paper